

Mini Foxie Club of Australia Inc.

Email completed form to:

MFCA Registrar registrar@minifoxie.org

NOTIFICATION OF DESEXING

Please print clearly in block letters

Members Name:			
Membership No: Kenne	el Prefix:		
Postal Address:			
			Postcode:
Email:		Phone:	
I hereby notify the Registrar of the sterilisation of			
(registered name of dog/bitch/pup)			
Registration number	Date si	erilised	
I have enclosed the original MFCA Certificate of Registration, for updating.*			
I have enclosed a copy of the veterinarian's Certificate of Sterilisation.			
Signature of owner		Date	
* If you cannot supply the MFCA Certificate of Registration, please contact the Registrar.			
FOR OFFICE USE ONLY			
Date Received	Received by	Certificate sen	t
Entered into database	Fee	Receipt	